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Mail Stop ISSUE FEE
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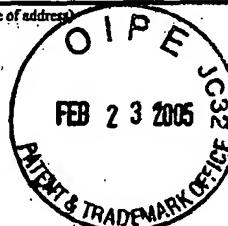
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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22907 7590 11/19/2004

BANNER & WITCOFF
1001 G STREET N W
SUITE 1100
WASHINGTON, DC 20001
02/24/2005 SSITHIB2 00000127 012745 10005153

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:8001 3.00 DA



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/005,153	12/07/2001	Irwin Gersberg	003493.00513	1367

TITLE OF INVENTION: HYBRID FIBER TWISTED PAIR LOCAL LOOP NETWORK SERVICE ARCHITECTURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	02/22/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
YAO, KWANG BIN	2667		370-354000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev.03-02 or more recent) attached. Use of a Customer Number required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AT&T Corp. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

New York, NY 10013

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies 1

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2745 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Thomas A. Restaino

Date 1/26/2005

Typed or printed name

Thomas A. Restaino

Registration No. 33,444

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL FORM

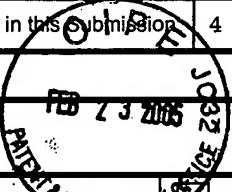
(to be used for all correspondence after initial filing)

Total Number of Pages in this Submission

4

Application Number	10/005,153
Filing Date	12/07/2001
First Named Inventor	Irwin Gerszberb
Group Art Unit	2667
Examiner Name	Yao, Kwang Bin

Attorney Docket Number	112813 CON
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Enclosures (check all that apply)

Fee Transmittal Form
 Fee Attached
 Amendment / Response
 After Final
 Affidavits / Declaration(s)
 Extension of Time Request
 Express Abandonment Request
 Information Disclosure Statement
 Certified Copy of Priority Document(s)
 Response to Missing Parts under 37 CFR 1.52 or 1.53
 Response to Missing Parts/Incomplete Application

Assignment & Recordation Cover Sheet
 Drawing(s) & Letter to Official Draftsman
 Licensing-related Papers
 Petition to the Commissioner
 Petition to Convert a Provisional Application
 Power of Attorney, Revocation Change of Correspondence Address
 Terminal Disclaimer
 Request for Refund

After Allowance Communication to Group
 Appeal Communications to Board of Appeals and Interferences
 Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)
 Proprietary Information
 Status Letter
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 CD, Number of CDs
 Additional enclosure(s) (please identify below)

Issue Fee Transmittal (2 copies)
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Remarks Response to Notice of Allowance and Fee Due mailed 11/19/04

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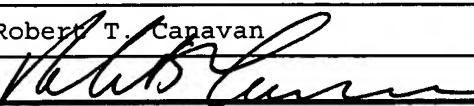
NAME	Samuel H. Dworetzky			
ADDRESS	AT&T CORP., One AT&T Way, Room 2A-207			
CITY	Middletown	STATE	New Jersey	ZIP CODE 07921
COUNTRY	United States of America		FAX	908-532-1281

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Robert T. Canavan	Reg. #	37592
TELEPHONE	908-707-1568		
SIGNATURE		DATE	02/18/2005

CERTIFICATE OF MAILING

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Signature	

Date

02/18/2005

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